

A photograph of a female doctor in a white lab coat with a stethoscope around her neck, smiling as she examines the chest of an elderly female patient in a blue top. The patient's hands are clasped in front of her. The background shows a clinical setting with a window and a heart diagram on the wall.

In The Know

SEPTEMBER 2020

Temporary Telehealth Policy Guidelines – All Lines of Business

Telehealth has been an important part of our members' care during the past several months of COVID-19. We appreciate your partnership in helping us ensure our members have access to care whether by phone, virtual check-in; or virtual visit via Skype, FaceTime, or other video exchange.

The New York State Department of Financial Services has updated guidelines for health plans offering telehealth services. To align with these new guidelines, we have made the following changes:

- EmblemHealth members in our Commercial line of business will have no cost-sharing (including copayments, coinsurance, or deductibles) for in-network telehealth visits conducted through Nov. 9.
- On Sept. 9, the telehealth waiver expired for our Medicare line of business. You may begin collecting member cost shares for dates of service beginning Sept. 10.

Please also see our [Temporary Telehealth Policy](#) containing allowable procedure codes, and [Frequently Asked Questions](#) for guidance on these services for our members. [Click here](#) to learn how you can use telehealth to close gaps in care and get the data needed for commercial, Medicaid, and Medicare Advantage health plan risk adjustment programs.

Flu Season is Here – Remind Your Patients to Get a Flu Shot

Each year during flu season, we remind our members to call their doctors to make an appointment to get a flu vaccine to protect themselves and their families. Please encourage your patients to get a flu shot. All children six months of age and older should be vaccinated against the flu each year according to the Centers for Disease Control and Prevention (CDC).

For most members, there is no copayment, coinsurance or deductible if the only service that is provided during the visit is the administration of a flu shot. If there is an additional, separate reason billed for a visit, applicable copayment, coinsurance and deductible will apply.

Here are the codes we cover:

Medicare Codes for Flu Vaccinations		Commercial Codes for Flu Vaccinations	
90653	90686	90653	90686
90662	90687	90662	90687
90672	90688	90672	90688
90674	90694	90674	90694
90682	90756	90682	90756

90685	90685
Administration Code: G0008	Administration Codes: 90460, 90461, 90471, 90472, 90473 and 90474

Medicaid (FFS) Codes for Flu Vaccinations	
90653	90673*
90656*	90674
90658*	90682
90661*	90686
90662	90688
90672	90694
90756	
Administration Codes for members 19 y/o and younger: 90460 (VFC) Administration Codes for members 19 y/o and older: 90471, 90472, and 90473	

* Vaccine CPT codes pending confirmation by the State. This information may also be found on our [website](#).

September is Gynecologic Cancer Awareness Month

According to the Centers for Disease Control and Prevention (CDC), all women are at risk for gynecologic cancers. Talk to your patients and encourage them to visit their gynecologist and get regular screenings. The

CDC offers online resources and continuing medical education ([CME training](#)) for health care providers. Cervical Cancer Screening is one of several quality measures we monitor for women's health. Please review our [Provider Quality Measure Resource Guide](#) for this and other measures that impact your patients.

New Provider Portal Coming Soon

In keeping with our commitment to make it easier to work with us – and as part of EmblemHealth's continuing transformation – we are excited to share the news that we are building a new provider portal. We expect it to launch in the coming months. We will keep you informed of our progress and, in advance of the launch, will provide you with tips and tools to help your practice make a smooth transition to the new portal.

2020 EmblemHealth Collabor8™ Program Underway

We'd like to remind our providers about the Collabor8 program we created with one of our partners, Pulse8, to improve medical record documentation and claims coding. This applies to New York State of Health Marketplace (NYSOH) members, Medicare Advantage members, and Medicaid members. This year's program covers dates of service from Jan. 1 to Dec. 31, 2020.

Please use the Collabor8 web-based tool found on the EmblemHealth [Provider Portal](#) to assess and document patient encounters/office visits. EmblemHealth will pay for proper use of this tool in addition to the regular fee schedule. Please see the webinar/training section further down in this email for more information.

GOVERNMENT-SPONSORED PROGRAM UPDATES

New Medicare Networks Launching in 2021

Many of you have received a letter announcing that we will have different Medicare networks for our individual and group members in 2021. Currently, there is one network that serves both populations but, in 2021, we will have:

- VIP Prime Network, our largest network for group Medicare members who will also need to select a PCP and will need referrals.
- VIP Bold, our most extensive network for individual Medicare members.

Members will need to select a PCP, but this network will not require referrals.

- VIP Reserve, our network in Manhattan, Queens, Brooklyn, and the Bronx for individual Medicare members who enroll in one of our new 2021 VIP Reserve Medicare plans. As with VIP Bold, members will need to select a PCP but will not need referrals.

Medicaid, HARP, and CHPLUS

New York State Medicaid Update

The Office of Health Insurance Programs of the New York State Department of Health has posted its [September Medicaid Update](#).



CLAIMS CORNER

The [Claims Corner](#) section of our website is a rich source of information that helps your practice navigate EmblemHealth claims and billing processes. Please check often to see posted updates.

New ECHO Process Now in Effect for All Payments

As previously announced, EmblemHealth has a new claims payment process managed by ECHO Health, Inc. See our [Frequently Asked Questions](#) document to see how claims are now paid, how to sign up for EFT/ERA, and how to find your Explanations of Payment and 835/ERAs. If you have been receiving paper checks and want to be paid by EFT/ERA rather than virtual credit card, please wait until you have received your first virtual credit card payment before contacting ECHO at **888-492-0032**. ECHO will help you make the switch.

Get Paid Faster

Before submitting a claim, check to see you are sending it to the correct organization. Check to see if the member or services should have their claim paid by EmblemHealth, ConnectiCare, Montefiore CMO, HealthCare Partners,

Empire BlueCross BlueShield, or one of our vendor partners. For a full list, see the [Claims Contacts section](#) of our Provider Manual.

Do Not Bill Dual Eligible Members for Any Medicare Balance Due

If Medicare-Medicaid dual eligible individuals have their Part A and Part B cost-share covered by their Medicaid plan, they are not responsible for their Medicare Advantage cost-share for covered services. Please do not balance bill these members for Medicare deductibles, coinsurance, or copayments. If you received Medicare and Medicaid payments for services given to these members, it must be accepted as payment in full. [Learn More](#).



CLINICAL CORNER

Check Panel Reports – Schedule New Patient Visits

If you're a primary care physician, we urge you to regularly check your panel reports on our [website](#). Review the reports to identify new patients and call them to schedule a new patient visit. Please encourage new Medicare and Dual Eligible Special Needs Plan (SNP) members to complete and submit their Health Risk Assessments, too.

Clinical Practice Guidelines (CPGs)

EmblemHealth encourages our providers to consult our [Clinical Practice Guidelines \(CPGs\)](#) for assistance in the treatment of acute, chronic, and behavioral health issues. We've adopted these guidelines from professionally recognized sources and through consultation between board-certified specialists and our Health Status Improvement Subcommittee. The guidelines are reviewed and updated regularly. CPGs are not intended as a substitute for your professional assessment but to assist you in the management of certain types of preventive and clinical care.

Medical Policy Updates

All [Medical Policies](#) are available for download in Clinical Corner on our provider website. We encourage you to review this section for new information.

Medical Technologies Database

A comprehensive listing of medical technologies reviewed by the Medical Policy Committee for coverage consideration is available for download in Clinical Corner on our provider [website](#).



PHARMACY

EmblemHealth updates its Formulary on a regular basis. Find our most recent updates [here](#).

Coding Guidance for COVID-19 Testing

The New York State Department of Health (NYSDOH) has issued [coding guidance](#) for pharmacies engaged in COVID-19 testing of Medicaid recipients, including our Medicaid and HARP members.



WEBINAR/TRAINING

Join us Oct. 14 for our monthly webinar

On the second Wednesday of each month, we offer an educational webinar for our individual and group practitioners, and their office staff who have not yet attended an EmblemHealth training session. The next session is **Wednesday, Oct. 14** from 10 to 11 a.m., and 2 to 3 p.m. This monthly webinar gives you and your staff an overview of our products and benefit plans, special utilization management programs, and how to navigate our provider portal. [Registration is required](#).

VIP Prime Network Providers: Complete required SNP MOC training by Oct. 31

Each year, all Medicare providers in the VIP Prime Network are required to complete the Special Needs Plan (SNP)

Model of Care (MOC) training for each of the Dual Eligible SNPs in which they participate, as mandated by the Centers for Medicare & Medicaid Services (CMS). Find all required training modules for EmblemHealth, GuildNet and ArchCare on our [website](#). The deadline has been extended to Oct. 31.

Pulse8/Collabor8™ Training

We encourage you and your staff to take advantage of Pulse8's free, monthly, 60-minute risk adjustment [webinars](#). Register to see how you can improve your medical record documentation and claims coding. If you have questions about the Collabor8 tool or the Pulse8 resources available to you, call their Customer Support team at **844-878-5738** between 8 a.m. and 8 p.m. or email them at support@pulse8.com.



IN EVERY ISSUE

Keep Your Directory Information Current

If a provider in your practice is leaving, [please inform us](#) as soon as possible. To report other changes, you can also sign in to your Provider/Practice Profile on our [secure website](#). If you participate with us under a delegated credentialing agreement, please have your administrator submit these changes.

In Case You Missed It – In the Know Archives Available

If you missed an edition of In the Know, or have trouble opening a link in this one, please see all our newsletters on our [website](#).

EmblemHealth insurance plans are underwritten by Group Health Incorporated (GHI), Health Insurance Plan of Greater New York (HIP) and HIP Insurance Company of New York (HIPIC).

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